

CITY OF TAKOMA PARK, MARYLAND
TWO-PARTY NOISE DISTURBANCE COMPLAINT FORM

TO: City Clerk, City of Takoma Park, 7500 Maple Ave., Takoma Park, MD 20912.

FROM: 1st Party (print name) _____
Address _____ Telephone _____

2nd Party (print name) _____
Address _____ Telephone _____

1. On _____ (insert date) between the hours of _____
(insert time noise disturbance started) and _____ (insert time noise disturbance ended) this
person, _____ (insert name), created a noise
disturbance at the following location _____ (insert
address) by performing the following act(s): _____

2. The sound produced from the performance of the act(s) stated above created a
noise disturbance because the sound was (*check all that apply*):

_____ (a) Unpleasant, annoying, offensive, loud, or obnoxious. *Explain:* _____

_____ (b) Unusual for the time of day or location where the noise was produced or heard.
Explain: _____

_____ (c) Detrimental to the health, comfort, or safety of any individual or to the
reasonable enjoyment of property or the lawful conduct of business. *Explain:* _____

3. Other information/action requested: _____

4. We are interested in mediation of this Noise Disturbance Complaint in lieu of a
hearing by the Noise Control Board. YES____; NO____.
(If mediation is not requested or if all parties do not agree to mediation, then a hearing on
the Noise Disturbance Complaint will be scheduled before the Noise Control Board.)

5. Identification of the person and/or entity creating the noise disturbance.

Name: _____ Telephone: _____
Address: _____

We declare and affirm under penalties of perjury and upon personal knowledge that
the matters and facts set forth in this Noise Disturbance Complaint are true and correct.

1st Party Signature: _____ Date: _____

2nd Party Signature: _____ Date: _____

Notice: Noise _____
disturbance complaints must be filed within 10 days of the occurrence of the noise disturbance.